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Bib Data Sheet

CONFIRMATION NO. 5274

SERIAL NUMBER 09/808,894	FILING DATE 03/15/2001 RULE	CLASS 375	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. 450100-03068
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APPLICANTS
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None

**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******
JAPAN 2000-081829 03/17/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 04/24/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>W</i> Examiner's Signature Initials	STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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Electronic apparatus

FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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